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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/802,114

03/15/2004

Ephrem Wu

04-0626

3272

24319

7590

04/25/2008

LSI CORPORATION
1621 BARBER LANE
MS: D-106
MILPITAS, CA 95035

EXAMINER

OVEISSI, DAVID M

ART UNIT

PAPER NUMBER

2616

MAIL DATE

DELIVERY MODE

04/25/2008

PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	Application No. 10/802,114	Applicant(s) WU, EPHREM	
	Examiner DAVID OVEISSI	Art Unit 2616	

All participants (applicant, applicant's representative, PTO personnel):

(1) DAVID OVEISSI.

(3) Robert Miller.

(2) Huy Vu.

(4) ____.

Date of Interview: 09 April 2008.

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.

If Yes, brief description: ____.

Claim(s) discussed: ____.

Identification of prior art discussed: ____.

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Discussed the phrase "capable of" and potential amendment to replace the phrase(example, "switchable"). Examiner will further consider the potential alternative language.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

/Huy D. Vu/

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required